

# City of Frankfort

Sewer Department  
1200 Kentucky Avenue  
Frankfort, Kentucky 40601  
Phone: (502)875-2448 Fax: (502)223-7857

## Application for Sewer Bill Adjustment

Please fill out the information below.

Date: \_\_\_\_\_ Account No.: \_\_\_\_\_

Name on Account: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell/Work Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Billing Address if different from above: \_\_\_\_\_

### INCOMPLETE APPLICATION WILL DELAY SEWER DEPARTMENT RESPONSE

A written detailed explanation of the circumstances pertaining to the water loss must be attached to the application with an explanation of why this should be considered for a hardship adjustment. Please be as specific as possible. Indicate type of repair made, date of repair, who did repair (homeowner, landlord, name of plumber, name of handyman). ATTACH COPY OF RECEIPT ON REPAIRS MADE AND/OR PARTS PURCHASED TO APPLICATION.

Where did water go? Sewer \_\_\_\_\_ Ground \_\_\_\_\_

As per City Ordinance 52.04.A.7, refunds may be made for sewer charges in hardship cases, as determined by the Director of the Sewer Department. A customers bill may be credited based upon the Frankfort Electric and Water Plant Board's determination of water usage.

Please do not write in this area, office use ONLY

Monthly Ave: \_\_\_\_\_ High: \_\_\_\_\_ Adjustment \$ \_\_\_\_\_

Circle One:    Approved    or    Denied

Revised: 01/21/06